Patent // Attorney Docket No. <u>1018775-000824</u>

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of	MAIL STOP AF
Toshihiro Mori	Group Art Unit: 2625
Application No.: 09/841,039	Examiner: Manav Seth
Filing Date: April 25, 2001	Confirmation No.: 4356
Title: APPARATUS AND METHOD FOR DETECTING A PATTERN	) ) )

AMENDMENT/REPLY TRANSMITTAL LETTER Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Sir: Enclosed is a reply for the above-identified patent application.  $\boxtimes$ A Petition for Extension of Time is enclosed. Terminal Disclaimer(s) and the \$\infty\$ \$65 \$\infty\$ \$130 fee per Disclaimer due under 37 C.F.R. § 1.20(d) are enclosed. Also enclosed is/are: Small entity status is hereby claimed. Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$\Bigcup \$ 395 \$\Bigcup \$ 790 fee due under 37 C.F.R. \ \ 1.17(e). Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified above. on \_\_\_\_\_ for which Applicant(s) previously submitted \_ continued examination is requested.  $\Box$ Applicant(s) requests suspension of action by the Office until at least , which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed. A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a)

## Buchanan Ingersoll PC

(1809/2809) is also enclosed.

**ATTORNEYS** 

	No additional claim fee is required.
$\boxtimes$	An additional claim fee is required, and is calculated as shown below:

		AMENDE	D CLAIMS			
	No. of Claims	Highest No. of Claims Previously Paid For	Extra . Claims	Rate	Additi	onal Fee
Total Claims	11	20	0	x \$ 50 (1202)	\$	0
Independent Claims	6	3	3	x \$ 200 (1201)		600
☐ If Amendment adds multiple dependent claims, add \$ 360 (1203)					\$	0
Total Claim Amendment Fee				\$	600	
☐ Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee					0	
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT				\$	600	

	Charge	_ to Deposit Account No. 02-4800 for the fee due.			
	A check in the amount of	f is enclosed for t	he fee due.		
$\boxtimes$	Charge \$ 600.00 to cred	it card for the fee due. Form PTO-2	038 is attached.		
$\boxtimes$	The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.				

Respectfully submitted,

**BUCHANAN INGERSOLL PC** 

Date June 1, 2006

By:

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